



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Application  
No. 09/755,207

CHEN et al.

Examiner: TU X. NGUYEN

Filed: 01/05/2001

For: METHOD AND APPARATUS  
FOR POWER LEVEL  
ADJUSTMENT IN A WIRELESS  
COMMUNICATION SYSTEM

Group No. 2684

RESPONSE TO OFFICE ACTION

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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SEP 16 2004

Technology Center 2600

Dear Commissioner:

In response to the Office Action dated June 3, 2004, please amend the above-identified application as indicated below. Applicants hereby petition a one (1) month Extension of Time.

## CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

## MAILING

- deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: Kelley M O'Patry  
(type or print name)

Date: 9/10/04

Signature: K. M. O'Patry

## FACSIMILE

- transmitted by facsimile to the Patent and Trademark Office.

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09/15/2004 HALI11 00000060 09755207

01 FC:1251 110.00 DA

Attorney Docket No.: 010098

Customer No.: 23696

## AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer No.: 23696  
Attorney Docket No.: PA 010098  
In Re Application of: Chen et al.  
Serial Number: 09/755,207  
Filed: January 5, 2001  
Examiner: Tu X. Nguyen  
Group Art Unit: 2684



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Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	9	9	0	x \$18 =	\$0.00
Independent**	3	3	0	x \$86 =	\$0.00
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$290	\$0.00
EXTENSION FEES			<input checked="" type="checkbox"/> One Month	\$110	\$110.00
			<input type="checkbox"/> Two Months	\$420	\$
			<input type="checkbox"/> Three Months	\$950	\$
TERMINAL DISCLAIMER				\$110	\$
*If the number in column a is less than 20, enter 0 in column c. **If the number in column a is less than 3, enter 0 in column c.				TOTAL FEE	\$110.00

4.  Fee check in the amount of \$ \_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5.  Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$110.00.  
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6.  The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: September 10, 2004

Signature:

Erin P. Madill, Reg. No.: 46,893

Phone No. 858-658-2598

QUALCOMM Incorporated  
Attn: Patent Department  
5775 Morehouse Drive  
San Diego, California 92121-1714  
Telephone: (858) 658-5787  
Facsimile: (858) 658-2502

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(type or print name)

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